CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION

INSTRUCTIONS: Complete items 1 - 10 on the form. Use a separate form for each policy interpretation request. If additional space is needed, please use the second page. Be sure to identify the additional discussion with the appropriate number and heading. Retain a copy of the CF 24 for your records.

- Questions from counties, including county Quality Control, must be submitted by the county CalFresh Coordinator and may be submitted directly to the CalFresh Policy analyst assigned responsibility for the county, with a copy directed to the appropriate CalFresh Policy unit manager.
- Questions from Administrative Law Judges may be submitted directly to the ColEroch Boliev english assigned representative to the country

_	where the hearing took place, with a copy of the form directed to the	e ap	propriate CalFresh Bureau unit	manager.		
1.	RESPONSE NEEDED DUE TO:	5.	DATE OF REQUEST:	NEED RESPONSE BY:		
	✓ Policy/Regulation Interpretation		9/18/2012	9/28/2012		
	□ QC	6.	COUNTY/ORGANIZATION:			
	☐ Fair Hearing ☐ Other:	Shasta County 7. SUBJECT: Alignment of CalFresh and Medi-Cal				
2.	REQUESTOR NAME:	8.	REFERENCES: (Include ACL/ACIN, NOTE: All requests must have a re	court cases, etc. in references) gulation cite(s) and/or a reference(s).		
3.	PHONE NO.:		ACIN I-82-01 Question #1			
4.	REGULATION CITE(S):	1				
	63-504.1, 6504.161, 63-509(h)(1)					
9.	QUESTION: (INCLUDE SCENARIO IF NEEDED FOR CLARITY):					
	Can a certification of less than 12 months be given to a client at application/recertification (RE) in order to align the RE with that of another program (such as a CalWORKs, Medi-Cal (MC), County Medical Services Program [CMSP]) if the client requests it and has been informed of the options?					
	(Scenarios on Page 2)					
	(**************************************					
10.	REQUESTOR'S PROPOSED ANSWER:					
	The CWD may grant a certification period of less than 12 months at application/RE if the client requests to align the CalFresh RE with that of another program and the client has been informed of the options.					

STATE POLICY RESPONSE (CFPB USE ONLY):

The CWD may grant a certification period of less than 12 months at application if the duration of the certification period is at least 6 months per MPP 63-504.111. The CWD may not shorten an existing certification period to align with another program other than the exceptions cited in MPP 63-504.14.

FOR CDSS USE RECEIVED: DATE DESPONDED TO COUNTY/ALLIA		
DATE RESPONDED TO COUNTY/ALJ:		

	ALFRESH (CF) PROGRAM EQUEST FOR POLICY/REGULATION INT	ERPRETATION (Continued)	
1.	RESPONSE NEEDED DUE TO: Policy/Regulation Interpretation	5. DATE OF REQUEST: NEED RESPONSE BY: 9/18/2012 9/28/2012	
12	☐ QC ☐ Fair Hearing ☐ Other:	6. COUNTY/ORGANIZATION: Shasta County	
		7. SUBJECT: Alignment of CalFresh and Medi-Cal	
2.	REQUESTOR NAME:	8. REFERENCES: (Include ACL/ACIN, court cases, etc. in references) NOTE: All requests must have a regulation cite(s) and/or a reference(s).	
3.	PHONE NO.:	ACIN I-82-01 Question #1	
4.	REGULATION CITE(S): 63-504.1, 6504.161, 63-509(h)(1)		

Scenario #1:

Client has ongoing CalFresh case and RE is due 11/2012.

Client applies for MC on 9/3/2011

Client requests to have the CalFresh RE aligned with the MC RE.

Scenario #2:

Ongoing MC case with last reinvestigation (RE) date of 6/2012.

Client applies for CalFresh on 9/3/2011.

Client requests to have the CalFresh RE aligned with the MC RE.

Scenario #3:

Ongoing case with CalFresh and MC.

The MC RE is due 8/2012 and the CF RE is due 10/2012.

Client requests to have the CalFresh RE aligned with the MC RE.